

Whitetail Deer Survey

Name: _____

Address: _____

Phone: _____ Email: _____

1. Do you enjoy seeing deer in the community? (please circle one)

- a) Yes
- b) No
- c) Sometimes

2. Are you experiencing any deer problems currently? (please circle) Yes No

3. What deer-related problems are you/ have you experienced in the past year? (please circle all that apply)

- a) Deer-auto collision
- b) Browsing of vegetable gardens
- c) Browsing on ornamentals/ flowers
- d) Browsing of crops
- e) Human-habituated "too tame" deer
- f) Orphaned fawn
- g) Other: _____

4. What is the level of severity of any deer problem you've experienced in the past year?
Given a 1-5 scale here, with 1 being no problem, 5 being severe:

- | | |
|-------------------------------------|-------|
| a) Deer-car collision | _____ |
| b) Browsing on vegetable garden | _____ |
| c) Browsing on trees/ornamentals | _____ |
| d) Browsing of flowers | _____ |
| e) Browsing of crops | _____ |
| f) Human-habituated "too tame" deer | _____ |

5. Have you taken any actions to alleviate problems? (please circle) Yes No

6. What actions have you taken? (check all that apply, and indicate how successful the action was on a 1-5 scale with 1 being ineffective and 5 being highly effective)

- | | | |
|---|--------------------------|-------|
| a) Tolerance / no action | <input type="checkbox"/> | _____ |
| b) Switched to planting deer-resistant flower/ plant varieties | <input type="checkbox"/> | _____ |
| c) Used fencing / netting / barriers | <input type="checkbox"/> | _____ |
| d) Used repellents | <input type="checkbox"/> | _____ |
| e) Scare devices | <input type="checkbox"/> | _____ |
| f) Hazing – i.e. using scare tactics to re-instill natural fear of humans | <input type="checkbox"/> | _____ |

7. What kind of deer problem management program is acceptable to you? (please circle)

- a) Prefer non-lethal (no killing of deer) options only
- b) Prefer Lethal (killing of deer) options only
- c) Combination of above
- d) No opinion / don't care

8. What specific actions are acceptable to you? (please circle all that apply)

- a) Do nothing/ leave deer alone
- b) Non-lethal measures –dart deer with contraception vaccine or use surgical sterilization
- c) Non-lethal landscape protection measures – public education and workshops on deer resistant gardening, discounts at local garden stores
- d) Lethal measures – archery hunting
- e) Lethal measure – shotgun hunting
- f) Lethal measures –sharpshooting program

9. How do you feel about deer? (please circle)

- a) I enjoy the presence of deer,
- b) I enjoy the presence of deer, BUT I am experiencing some problems
- c) I do not enjoy the presence of deer and regard them as nuisances
- d) I'm concerned about collisions
- e) I'm concerned about Lyme disease

10. How do you feel about expanding hunting in the community? (please circle)

- a) I do not support the hunting of deer locally
- b) I support the hunting of deer locally
- c) No opinion / don't care either way

11. Additional comments:

Please mail or deliver completed surveys by **January 5, 2016** to:

City of Manistee

70 Maple St.

Manistee, MI 49660